PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10747792

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			36		·			RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		-	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			36 minus 20=		. 16			XS 9=		OR	X\$18=	288
INDEPENDENT CLAIMS			5 mi	nus 3 =	.3	•		X43=		OR	X86=	172
ML	ULTIPLE DEPEN	NDENT CLAIM PI	RESENT	•				+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	12SO
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u>L</u>	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	/	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	.36	Minus	- 30	2	-		X\$ 9=		6A	X\$18=	
	Independent	• 5	Minus)			X43=	Ω,	OR	X86=	
Ľ	FIRST PRESE	NTATION OF MU	JETIPLE DEF	ENDEN	CLAIM		}	+145=		OR	+290≥	/
1 1 -								TOTAL ADDIT, FEE		'	TOTAL ADDIT. FEE	
	1123/01	O _(Column 1)		(Colun	nn 2)	(Column 3)		-0011.1 EE		•	~	
AMENDMENT B	,	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		PATE	ADDH TIONAY	N	RATE	ADDI- TIONAL FEE
	Total	. 36	Minus	* 3	6	=		X\$ 9=		ÐЯ	X\$18=	
	Independent	• 5	Minus	***5		a] [X43=	5	OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.145			.200-	
								+145=		OR	+290= TOTAL	•
		4	ODIT. FEE		OR	ADDIT. FEE						
	<u>.</u>	(Column 1) CLAIMS		(Colum		(Column 3)	, _					
AMENDMENT C		REMAINING AFTER AMENDMENT	÷	NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	1 [X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***			lt	X43=			X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **On the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." **On the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									<u> </u>	OR	TOTAL ADDIT, FEE	
		mber Previously Paid ther Previously Paid					er four	nd in the app	ropriate box	in col	umn 1.	
							•		·			